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KRATZ, QUINTOS & HANSON, LLP 1420 K Street, N.W. Suite 400				I hereby certify that the States Postal Service v	with sufficient postage for fi	ismission ing deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below.
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APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	FOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/534,712	05/12/2005		Keiji Hirao		050302	6883
FITLE OF INVENTION: CONTENTS REPRODUCING APPARATUS WITH TELEPHONE FUNCTION						
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	E FEE TOTAL FEE(S) DUI	E DATE DUE
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EXAMINER ART UNIT			CLASS-SUBCLASS			
WOO, STELLA L 2614			379-101010			
. Change of correspondence CFR 1.363).	e address or indication	of "Fee Address" (37	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 KRATZ, OUINTOS			
Change of correspon Address form PTO/SB/I	dence address (or Char	ge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 & HANSON, LLP			
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	tion (or "Fee Address"	Indication form ed. Use of a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
A ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for						
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
SANYO ELECTRIC CO., LTD.			Moriguchi-shi, Japan			
	RIC COL, LID	•	HOLIGAC	Jii-Siii/ Cape	41.1	_
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🛂 Corporation or other private group entity 🔲 Government						
a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
Issue Fee Publication Fee (No:	small entity discount n	ermitted)	☐ Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # o			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 01–2340 (enclose an extra copy of this form).			
Change in Entity Status	(from status indicated	ahove)	overpayment, to D	eposit Account Numb	er <u>()1-2.34()</u> (enclose	an extra copy of this form).
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NOTE: The Issue Fee and F nterest as shown by the rec	Publication Fee (if requ	ired) will not be accepted	d from anyone other th	an the applicant; a reg	istered attorney or agent; or	the assignee or other party in
Authorized Signature	me		_{Date} Janu	ary 26, 2009		
Typed or printed name	Jason T. Son	ma		Registration	1610326000038	012340 10534712
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Authorized Signature Jason T. Somma

Date January 26, 2009

Registration No. 61,526

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